

L23000249239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

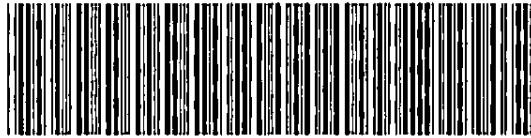
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
W23000019644
03/07

Office Use Only



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CHATHAM

May 22 2023

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 13, 2023

CECILKERR
3713 NE 19TH ST
HOMESTEAD, FL 33033 US

SUBJECT: PEOPLE'S CHOICE-HANDYMAN SERVICES LLC
Ref. Number: W23000019644

We have received your document for and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

If you have any further questions concerning your document, please call (850) 245-6052.

KAIN COSTELLO
Regulatory Specialist II
New Filing Section

Letter Number: 323A00003433

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: PEOPLE'S CHOICE-HANDYMAN SERVICES LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CECIL KERR
Name of Person
PEOPLE'S CHOICE-HANDYMAN SERVICES LLC
Firm/Company
3713 NE 19TH ST
Address
HOMESTEAD, FLORIDA 33033
City/State and Zip Code
STEVEKERR1923@YAHOO.COM
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

CECIL KERR 786 397-3357
at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PEOPLE'S CHOICE-HANDYMAN SERVICES LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

3713 NE 19TH ST HOMESTEAD, FL 33033

Mailing Address:

3713 NE 19TH ST. HOMESTEAD FL
33033

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

CECIL KERR

Name

3713 NE 19TH ST

Florida street address (P.O. Box **NOT** acceptable)

HOMESTEAD

FLORIDA

33033

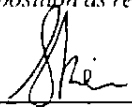
City

State

Zip

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SECRETARY OF STATE
STATE OF FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..



Registered Agent's Signature (REQUIRED)

(CONTINUED)